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Bulletin
OF THE
National Tuberculosis Association

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Reservations for the Santa Barbara Meeting

Have you made your reservation for the Santa Barbara Meeting of the National Tuberculosis Association? If not, we advise doing it now.

The actual date of the Annual Meeting will probably be June 20 to 23, inclusive. Preliminary meetings of state executives and other groups will be held on June 18th and 19th.

Santa Barbara has excellent hotel accommodations. Through the courtesy of the Hotel Men's Association of Santa Barbara, a flat rate of $7.00 per day, per person, American plan, is given in all of the hotels listed below. This includes, with the exception of one, all of the leading hotels in Santa Barbara. The rate applies to rooms with bath as well as to rooms without bath. The following hotels are suggested:

The Arlington, a comfortable hotel with modern equipment, located in the city about five or six blocks from the Recreation Center where the meetings will be held.

The Samarkand, a Persian Hotel, one of the most unique hostelries of its kind in the United States, situated on the outskirts of the city, but within easy reach of car line and bus. About three miles from the meeting place.

The El Encanto, a central homelike building and cottages built around a beautiful garden. Situated about three miles from the meeting place on the outskirts of the city.

The Unit of Control in Tuberculosis

By Philip P. Jacobs, Ph.D., Publicity Director

One would think that after the last fifteen years of agitation for county hospitals the question of what is the best unit of control in tuberculosis had been settled. There still appears to be a certain amount of confusion, however, in the minds of even comparatively well informed people on this subject. A summary of some of the experiences in different parts of the country may be apropos for readers of the BULLETIN.

There has always been and probably always will be a certain group of people who, without very carefully thinking on the subject, consider the control of tuberculosis as essentially a problem of the federal government. The United States is built upon lines that practically preclude such a system of control. Even if there were a strong, well financed federal department of health, it is practically inconceivable to think of such a body directing administrative activities tending to control tuberculosis throughout the United States. Such trespassing on the part of the federal government upon the sovereign rights of the several states would be severely resented. Furthermore, the unit of control as a whole would become so large that the possibility of administering the machinery from one centralized office in Washington is almost preposterous. How far the federal government shall participate in the control of tuberculosis is another question about which there is some difference of opinion. The efforts of the advocates of the Kent Bill, about eight or nine years ago, to provide federal subsidies for local hospitals did not meet with very general approval on the part of the federal legislators. That the federal government should care for disabled ex-service men who have tuberculosis seems to be a matter about which there is no question. There probably is a field for federal control in the development of facilities for that considerable group of individuals who are never able to maintain a residence in any state and who are not legally charges, however, upon any local governmental unit. The function of the federal government also in the matter of education and in the matter of regulation of interstate traffic where tuberculous patients are concerned seems to be a fairly well defined one, although not, we are sorry to say, so well accepted as it is defined.

The function of the state in relation to tuberculosis control opens another question. The fact that the first logical efforts to provide institutional care for tuberculosis were out of state funds, as for example the state sanatorium in Massachusetts or New York, in the earlier days of the tuberculosis campaign, developed a movement for building state sanatoria in every state. Between the years 1904 and 1910 state sanatoria sprang up all over the country. Following the increased interest in the development of local hospitals, the movement for state sanatoria waned.

The State System in Pennsylvania

Out of this conception of the state sanatorium as the first and most desirable agency in the campaign against tuberculosis grew a system in Pennsylvania which is now beginning to pass. In 1907 through the efforts of the late Doctor Dixon, then commissioner of health, a large appropriation was secured for the establishment of a tuberculosis sanatorium at Mt. Alto. From that time on the state of Pennsylvania has appropriated every year as much as two million dollars and even more to the state government for the control of tuberculosis. At the present time the state maintains three sanatoria and a chain of over one hundred state dispensaries scattered in local communities throughout the commonwealth. For years Doctor Dixon and his associates fostered and developed the idea that the control of tuberculosis was essentially and predominantly the function of the state department of health and that there was no place in a system of control either for the voluntary non-official association, or for the local, county or community tuberculosis hospital or other agency. The fallacy of this argument has within the last two or three years, with the change of administration, become more and more apparent. The present administration has favored and is strongly urging the development of a system of local hospitals. There probably always will be, because of the large invested overhead, a certain amount of centralized control in Pennsylvania, and the local hospitals now building must be fitted into the existing scheme of things. It is sufficient here, however, to note that the idea originally developed by Doctor Dixon is very strikingly modified in the present practice of the state department of health of Pennsylvania.

(*Continued on page 2*)

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The Unit of Control in Tuberculosis

(*Continued from page* 1)

The District Hospital

Contrasted with the policy of the Pennsylvania state department of health has been that developed by such states as New York and Illinois, for example. Here the effort has been to build a strong local unit. In the latter state there was a very strong movement for a state sanatorium several years ago, but it was defeated in favor of a plan for the establishment of municipal and later of county hospitals. The weakness of the original county hospital plan, however, has been shown essentially in this fact, viz., that many counties are utterly unable to afford the luxury of a tuberculosis hospital because of the smallness of their population, or area, or both. The district hospital, therefore, has had to be developed combining two or more counties into a district.

For the large cities like New York, Chicago, Buffalo, Cleveland, St. Louis and others there has been a very distinct effort to develop local municipal institutions. In some instances this effort has been carried on, we are sorry to say, at the expense of the rural areas surrounding the municipality. Thus Kent County, Mich., of which Grand Rapids is the county seat, is well served while the rural area is lacking in local hospital facilities.

It is now generally conceded that the best unit of control, therefore, is the small local one, either the city, county, district, or a combination of these three. The local unit must provide these features for a program of control; case-finding machinery, provision for the care of early cases, provision for the care of advanced and dying cases, home provision and care, provision for the care of children who have been exposed or who are physically sub-standard, general and special education on tuberculosis and public health, and the proper administrative official and non-official agencies to develop and carry out this program.

EXECUTIVE SECRETARIES OF THE NORTHWEST. LEFT TO RIGHT: MRS. B. B. BUCHANAN, WASHINGTON; MRS. SADIE ORR-DUNBAR, OREGON; MRS. C. R. ATHEY, IDAHO; MRS. SARA E. MORSE, MONTANA; MRS. MARTHA O. DAVIS, NEVADA; MISS ETTA M. DOBBIN, WYOMING

Have You Made a Budget?

The county tuberculosis association that submits its budget to the state association early in the year has much to gain, for an early budget results in a definitely-approved county plan, which in turn can be placed before the public in a simple, easily understood form. Unfortunately, some state associations give little heed as to how their local groups spend their seal funds, or how their expenditures are apportioned. But most state associations have learned that this is an important matter which requires and is worthy of serious thought and co-operation. A definite budget defines to a nicety what portion of the available funds are to be expended for the various undertakings of an organization.

Child Health Associations Amalgamated

The American Child Hygiene Association and the Child Health Organization of America have amalgamated in the interest of furthering the campaign for child health in the United States. The title of the new organization is the American Child Health Organization.

One of the undertakings of the new body will be the supervision of the three new demonstrations in community health work for children made possible through the Commonwealth Fund. The demonstration already under way in Ohio, financed by a Red Cross appropriation to the National Child Health Council also furnishes an opportunity for practical application of the principles that have been developed by the parent associations.

For the past thirteen years, beginning with the formation of the American Association for the Study and Prevention of Infant Mortality, there have been groups of workers interested in child health who have developed standards and labored to have these adopted by parents, children and in the schools. The growth of this work is well illustrated in the development from the original membership of 917 to the present membership of the American Child Hygiene Association, 2,047, and the increase in the affiliated societies from 134 to 339.

The pooling of the efforts of the two organizations is being generally welcomed by those who have formed the membership and give the moral support to the child health movement. They look forward with confidence to the new association as an avenue of greater opportunity and of broader and more useful service.

The Spirit of the Play

By Milton E. Bond, Director of Plays and Pageants, Tuberculosis Association of Rochester and Monroe County, New York

Winter is the time when children and teachers alike are most interested in the presentation of plays, for the weather prohibits as much outdoor activity as is possible during the warmer seasons. To those who are inexperienced in play production, however, the problems connected with lighting, settings, costumes, and direction are often appalling. Yet health plays go far toward educating the public in the principles of hygienic, healthful living. The work is fascinating and the satisfaction to the creator and producer of a successful production is unbounded. Mr. Milton E. Bond, the author of this article, has given much of his time to the study of production of plays and pageants, particularly in the health field. His suggestions are intended primarily for beginners, and are in answer to the questions that are most frequently received at the office of the National Association.

There are several very good health plays and pageants published either by the National Association or by the individual associations which may solve the great problem of choosing a suitable piece on which to begin work. It might add greater interest to the production if the piece would be written by some local talent, but this is not always possible.

Considering the piece as chosen, the time and place of performance decided upon, the next logical step is to cast the characters. From this point on there is nothing more important than to create and maintain a spirit of interest and cooperation, especially among the actors, for it is their *spirit* that will finally make or mar the whole performance despite all other elements. The stage may be bare or gorgeously set, but the actors' *spirit* will carry or floor the piece.

Therefore, before assigning any parts, at an assembly of all who are to take any part in the production, the play should be read by the director. This is no small task for him. As yet he has no stage, no lights, scenery, costumes or properties, and yet he should be actor enough, with a free imagination, to conjure up all these before his hearers and to implant the embryo of that spirit which is to carry the task to success.

We will assume that after the reading everyone is enthusiastic. As far as possible each is assigned some part in the whole, helping in acting, scenery, lights, etc., and is given a general idea of his duties. These duties are afterward enlarged upon in more personal interviews between the director and the individual. Where possible it is well to let the actors have some choice in their parts as one will do so much better in a part he likes than in one thrust upon him without his interest. Of course obvious physical characteristics as size, voice and the like will qualify all choice.

The progress of production is now almost entirely up to the director. Of necessity he must have the absolute cooperation of all. It is too much to expect one man to shoulder everything. But he is the center of action, the motive force, the dictator of all behind the footlights. He ought not to be bothered about any of the responsibilities of the other side, the business end. The art and mechanism of production is his realm. Here his word should be absolute and final. He must be open to suggestions from others but in any question he must decide. Directly under his personal supervision will be the acting. If it be a play, he must rehearse the actors in speech, gesture, movement, creating an atmosphere that will "get across."

It is well to work out the movement and grouping on charts, especially if the piece be a pageant which depends mainly on these elements. Each episode may be worked out on a large chart using colored pencils to indicate various groups or lines of movement, direction, entrances and exits. A key to the chart, colors, numbers, etc., should be plainly lettered at the bottom of each sheet. Complicated episodes may require several such charts of movement. The whole series may be bound in "loose-leaf" manner, allowing each to be turned back and a new one promptly in place. Throughout the rehearsals and at the performance, the director or one especially appointed, should be at some point of vantage always with his charts.

The next department under the director's supervision is that of "design." The settings, costumes, color schemes, lights, etc., must all be designed before they can be put into effect. The director must also be an artist to properly carry out this function. He best understands the moods, symbols and effects toward which he is working. Therefore, if he himself can design or help in the work, the result will show greater unity. And next to the spirit of a production the unity is the telling feature. In a great painting or musical composition one master mind works throughout the whole. So it should be in plays and pageants. If possible, the writing, action, music, design and execution should be the work of one mind. This, of course, is rare, but one should always strive for the next nearest to the ideal.

When the color schemes, costumes, scenery, etc., are designed they must be put into effect. This will require the help of many assistants who should have the same spirit as the actors in their work.

Rehearsals should not be too long as fatigue will spoil a performance and kill the fine spirit more quickly than anything else. A bad dress rehearsal is usual and should not be too discouraging; it is generally the result of much rehearsing, dulled spirits and nervousness. There ought to be a day or two elapse between the dress rehearsal and the performance, partly to smooth off the little rough spots, but chiefly to let down on the strain and allow a rest. At the last moment a little talk by the director is a wonderful help to stimulate anew that spirit which started off the work with so much vim. From the first reading of the manuscript to the final curtain keep up the "spirit of the play."

New Government Sanatoria

Within the next few weeks two fine institutions for the care of tuberculous ex-service men will be opened respectively at the central branch of the National Soldiers' Home, Dayton, Ohio, and at the Branch Home at Milwaukee, Wis.

These two institutions will form units of existing establishments and are planned and erected as the result of the recommendations of the "Consultants on Hospitalization" to the Secretary of the Treasury, generally known as the "White Committee." It will be remembered that members of the staff of the National Tuberculosis Association served as members of a technical advisory committee to the consultants.

The unit at Dayton will accommodate about 250 men and the Milwaukee unit about 525. The patients' quarters are characterized throughout by small interior units. There are no large wards, the largest unit being a 3-bed room.

The nature of the interior planning is such as to make the accommodation exceedingly flexible and to allow of an excellent classification of patients.

The accommodation for administrative functions is very complete, especially on the medical side of the work. In addition to convenient rooms for minor surgical procedures, eye, ear, nose and throat work, dental work, etc., there will be a large and commodious laboratory for routine and research work, and a well planned x-ray suite. The foregoing remarks as to accommodation apply equally to the new buildings at Milwaukee.

In each place, particular attention has been paid to accommodation for occupational therapy, pre-vocational training and recreation. Well lighted classrooms, commodious and airy craft shops, an auditorium equipped for moving pictures, and various smaller rooms for quiet games, reading, etc., comprise in each institution accommodation for these modern features of sanatorium treatment, which embodies the latest and best ideas on the subject.

The board of managers of the National Soldiers' Home is to be congratulated on these additions to their already fine series of buildings and on the celerity with which they have been erected. The whole of the equipment has also been assembled and is ready to be installed as soon as the contractors complete the buildings.

Modern Health Crusade
DEPARTMENT

Preparation of Handbook Nearly Completed

The handbook for teachers, written by Miss Theresa Dansdill, is now in the final stages of editing, and the author has returned to the National Association to serve in connection with the publicaion and introduction of the handbook into the school system of various states. Miss Dansdill served as educational director of the Iowa Tuberculosis Association for three years, and it was with reluctance that that Association released her. She joins the staff of the National Association as Assistant Crusade Executive. Under the plans formed, much of Miss Dansdill's services will be in the field. In addition to direct work on the handbook it is hoped that she may find time to lecture and give courses on the Crusade at normal schools and teachers' institutes.

The name proposed for the handbook is "Health Training in Schools." The handbook contains a course of study and practice in the formation of good health habits and is based upon the Modern Health Crusade system. The book is written in outline form, and stories, projects and games form an integral part of the lesson plans. The subject matter is grouped under the headings: exercise, food, cleanliness, sleep, exclusion, right thinking, posture and helpfulness, the nine health principles embodied in the cross of nine circles, the symbol of the Modern Health Crusade system.

The grading and the lessons are based upon the compiled data from large and small city schools, consolidated schools, and the courses of study used by a number of state departments of public instruction.

The outline for each grade is divided into nine chapters corresponding to the nine school months, but the material may be used over eight, seven or six months or a semester. There are ten lessons for each month, but the subject matter may be used for a greater or less number of lessons.

The manscript has been undergoing thorough editing at the hands of special committees appointed from the State and Provincial Health Authorities of North America, the National Council of State Departments of Education, the Secretaries of the State Tuberculosis Associations and the National Child Health Council.

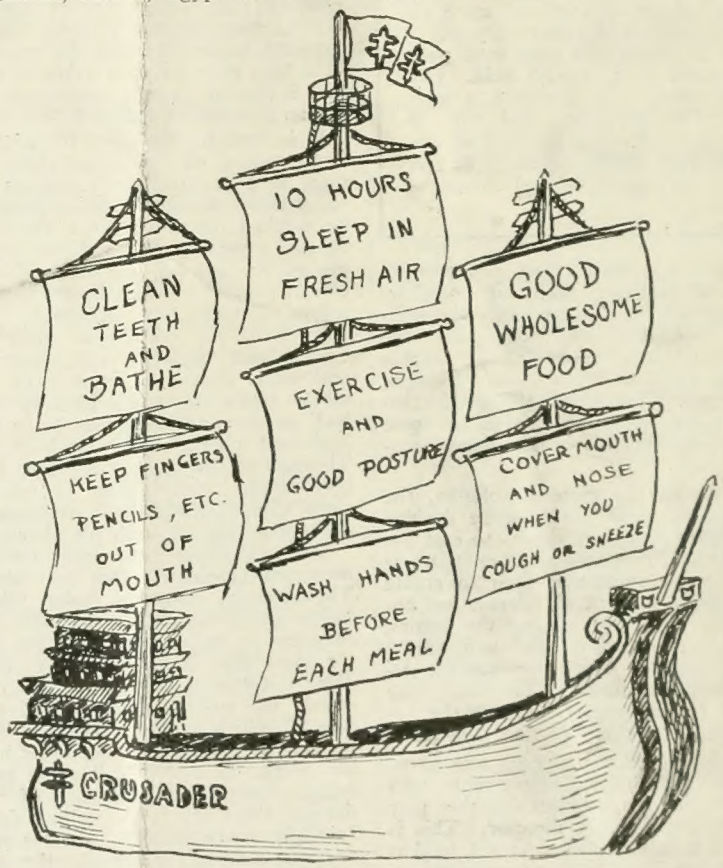
The National Association desires to contribute the handbook to the schools of the country as a means of making the practice of hygiene the essence of its teaching. The Association does not anticipate publishing the handbook as a commercial undertaking. It desires to put the book to the utmost service and give it widest distribution and with this in view plans no other charge than reimbursement of cost.

Where the schools of a state or large city desire special editions to be published in cooperation with national and state associations, this will be permitted. The many advance calls received for the handbook seem to indicate a highly satisfactory sale. Requests for copies have not been limited to the United States. They have also come from Canada, France, Egypt and China.

Tuberculosis Course for Nurses

Under the joint auspices of the Glockner Sanatorium and Hospital Training School and the Colorado Springs School of Tuberculosis of Colorado Springs, Colo., a three months' course in tuberculosis for nurses has been organized. The courses are open on January 1st, April 1st, July 1st and October 1st of each year. The course consists of lectures, quizzes, class recitation demonstrations and practice. Colorado offers unusual opportunities for practical clinical work of this character. The course is open to any graduate or under-graduate nurse, but is limited to ten students. Quarters and maintenance and $8 per month will be furnished in return for seven hours daily work in the wards.

Among the lecturers are Dr. Gerald B. Webb, Dr. G. B. Crouch, Dr. C. O. Giese, Dr. G. B. Gilbert, Dr. W. H. Swan, Dr. C. F. Gardner, Mrs. E. M. Pine and others.


10 HOURS SLEEP IN FRESH AIR
CLEAN TEETH AND BATHE
GOOD WHOLESOME FOOD
EXERCISE AND GOOD POSTURE
KEEP FINGERS PENCILS, ETC. OUT OF MOUTH
COVER MOUTH AND NOSE WHEN YOU COUGH OR SNEEZE
WASH HANDS BEFORE EACH MEAL
CRUSADER

"I Saw a Ship Asailing"

"I saw a ship asailing,
Asailing on the sea;
And oh! but it was laden
With Crusaders good to see.
They always kept the Health Rules
Just as they were told,
And every Knight upon it
Was oh! so strong and bold."

These verses, with a print of the Crusader ship and a brief letter, constituted the appeal of the Richmond, Va., Tuberculosis Association in a recent membership campaign.

For state and local tuberculosis associations in search of exhibit ideas, this offers an appealing suggestion. A model of the Crusader ship placed in a store window or in the association's booth at church fairs or similar local entertainments, would make a valuable as well as an attractive exhibit. In the observance of Health Education Week it would be helpful as suggestive material for posters, health rhymes, and similar schoolroom projects.